

**PUBLIC HEALTH SEATTLE & KING COUNTY
INSTRUCTIONS FOR PREPARATION OF KING
COUNTY SEWAGE REVIEW COMMITTEE APPLICATIONS**

NOTE: An application for waiver may be filed within sixty (60) calendar days of the decision or order of the health officer (i.e. the district E.H.S.). Any submittal received or postmarked after the 60-day deadline will be returned to the applicant as unaccepted. (See The Code of the King County Board of Health, Title 13, Chapter 13.12) The Committee will make recommendations only on the waiver requests specified in the application.

In order to make a timely and appropriate decision on your request for reconsideration, the following documents are the minimum which should be submitted. Submit five complete sets of the application package, including copies of all pertinent exhibits with each set.

☐ **All documents and support materials must be legible.**

- ☐ 1. An explanation of why application of King County Board of Health code will cause undue and/or unnecessary hardship;
- ☐ 2. An explanation of why waiver of a portion of the code will not jeopardize public health and safety or interfere with the rights of others in the comfortable enjoyment of their life or property. Provide technical justification for each specific waiver request.
- ☐ 3. Reference the specific chapter and section (from the Code of the King County Board of Health Title 13) you are requesting be waived or modified. If the appeal involves a formal policy & procedure, reference the document number.
- ☐ 4. Photocopies of all documentation involving the formal decision or order issued by the district E.H.S. With each application set, include copies of disapproved plot plans and all specifications associated with the proposed/existing sewage system.
- ☐ 5. Any additional evidence you may wish to include demonstrating why waiver or modification of the code will not result in an inadequate system. This may consist of geologist's reports, engineer's reports, manufacturer's literature, sewer district letters, photographs, or anything else which has a bearing on the application and will provide information to the Committee.
- ☐ 6. A **\$450.00** application fee;
- ☐ 7. Attach an accurate route and direction map for locating the subject property. (If the appeal involves property with an existing structure, indicate the color of building or mobile home.)
- ☐ 8. Notify all owners of property located within 300 feet of the subject property or the owners of the nearest 15 properties whichever is greater, concerning the nature of your appeal. (See instructions on attached form.)
- ☐ 9. Complete this checklist and submit it with your application to:

**Attn: King County Sewage Review Committee
Public Health Seattle & King County
14350 SE Eastgate Way
Bellevue, WA 98007**

Within forty days following receipt of a complete application, a meeting of the Committee will be scheduled to consider your request. In order that you may be notified of the date, time, and location of the meeting, please provide both an address and a telephone number where you may be contacted during working hours. You may also provide a fax number if desired. If applicable, list the names and mailing addresses of any additional persons to be notified of the future meeting.